Motion to Withdraw	
Claimant V	No.: Date:
Respondent	
The Undersigned moves to withdraw on the behalf of:	☐ Claimant ☐ Respondent
(Insert litig	gant's name.)
	Signature
· · · · · · · · · · · · · · · · · · ·	val upon all parties with proof of service. A copy of this appeared and have not been found by the Court to be in
☐ Atty. No.:	Service via email from counsel for the opposing party will be accepted at:
Please provide the following contact information:	
Name:	
Firm or Atty. for:	Email Address
Address:	
City/State:	
ZIP Code:	
Telephone:	Signature

SECRETARY OF STATE JESSE WHITE EX-OFFICIO CLERK OF THE ILLINOIS COURT OF CLAIMS